FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 21 AM 9:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 734279 (3)

1. Corporation Name
TARPON WOODS, TANGLEWOOD PATIO HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3490 EAST LAKE ROAD SUITE C PALM HARBOR FL 34685 US	% MANAGEMENT & ASSOCIATES PO BOX 1448 PALM HARBOR FL 34682-448 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/10/1975
3a. Date of Last Report: 04/25/1994
4. FEI Number: 59-1716033 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

SCANNAVION, DOMINICK
3490 EAST LAKE ROAD,SUITE C
PALM HARBOR FL 34685

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DS	1.1 TITLE		☐ Change ☐ Addition
NAME	BRONKE, MURIEL	1.2 NAME		
STREET ADDRESS	1640 PALMER CT	1.3 STREET ADDRESS		
CITY-ST-ZIP	PALM HARBOR FL	1.4 CITY-ST-ZIP		
TITLE	VPD	2.1 TITLE		XX Change ☐ Addition
NAME	FRENCH, SARAH	2.2 NAME	FRENCH, SALLY	
STREET ADDRESS	410 PALMER CIRCLE	2.3 STREET ADDRESS		
CITY-ST-ZIP	PALM HARBOR FL	2.4 CITY-ST-ZIP		
TITLE	T	3.1 TITLE		☐ Change ☐ Addition
NAME	JURGENSEN, RUSS	3.2 NAME		
STREET ADDRESS	910 PALMER LANE	3.3 STREET ADDRESS		
CITY-ST-ZIP	PALM HARBOR FL	3.4 CITY-ST-ZIP		
TITLE	D	4.1 TITLE		☐ Change ☐ Addition
NAME	GRAVES, ROBERT DR.	4.2 NAME		
STREET ADDRESS	1010 PALMER LANE	4.3 STREET ADDRESS		
CITY-ST-ZIP	PALM HARBOR FL	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE	D	☐ Change XX Addition
NAME	SHEFLETT, EUGENE	5.2 NAME	MESSEBERG, EVE	
STREET ADDRESS	1630 PALMER COURT	5.3 STREET ADDRESS	2040 PALMER WAY	
CITY-ST-ZIP	PALM HARBOR FL	5.4 CITY-ST-ZIP	PALM HARBOR FL	
TITLE	P	6.1 TITLE		☐ Change ☐ Addition
NAME	BATES, TOM	6.2 NAME		
STREET ADDRESS	1510 PALMER COURT	6.3 STREET ADDRESS		
CITY-ST-ZIP	PALM HARBOR FL	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X Thomas Bates
TOM BATES, PRES.
SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER OR OFFICER OR DIRECTOR — Date — Daytime Phone #

T34279

TARPON WOODS, TANGLEWOOD PATIO HOMEOWNERS' ASSOCIATION, INC.

ADDITIONAL DIRECTORS

D
PASSER, MEL
2020 PALMER WAY
PALM HARBOR FL